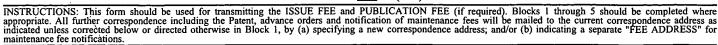
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Complete and send this form, together with applicable fee(s), to: Mail

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1	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
•	10/088,229	03/19/2002	Kazufumi Kai	Q61659	1681	

TITLE OF INVENTION: FUMARATE DERIVATIVE, METHOD FOR PRODUCING THE SAME

APPLN, TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	nonprovisional NO \$1		1	\$300	\$1700	11/30/2005
EXAMINER ROBERTSON, JEFFREY		ART UNIT		CLASS-SUBCLASS		
		1712		560-198000	,	
CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN SHOWA DENKO K. K	tion (or "Fee Address" Indicator more recent) attached. Use PRESIDENCE DATA TO Be an assignee is identified by 37 CFR 3.11. Completion EE	Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NOT	(1) the na or agents (2) the na registered 2 registered listed, no HE PATEN data will app a substitute (1) RESIDENCE (TOKYO,	pear on the patent. If an assign for filing an assignment. CE: (CITY and STATE OR COULT) Japan	at attorneys 1_ SUGH a member a es of up to no name is 3 ee is identified below, the of UNTRY)	·
4a. The following fee(s) are Vissue Fee Publication Fee (No s Advance Order - # of 5. Change in Entity Status a. Applicant claims St	enclosed: mall entity discount permitte f Copies (from status indicated above MALL ENTITY status. See	4b ed) 2) 37 CFR 1.27. ue Fee and Publicat will not be accepted ent and Trademark	Payment of A check charge a PODA 1	patent): Individual Corrects: Is attached for the NC any payment deficiency and payment deficiency and payment is no longer claiming SMAI any) or to re-apply any previousle other than the applicant; a region pate Date	DA Fees payment. Pland credit overpayme y of this form is attack. LL ENTITY status. See 37 Cy paid issue fee to the applic stered attorney or agent; or the status of the	ease any overpayment, to this form).

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